

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

The Council of Insurance Agents & Brokers Political Action Committee

ADDRESS (number and street)

701 Pennsylvania Avenue, NW

Suite 750

☐Check if different
than previously
reported. (ACC)

Washington

DC

20004

2608

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00039578

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2006

through

02

28

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ken A. Crerar

Signature of Treasurer

Electronically Filed by Ken A. Crerar

Date

03

10

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		47938.52
(b) Cash on Hand at Beginning of Reporting Period	60438.52	
(c) Total Receipts (from Line 19)	44225.00	56725.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104663.52	104663.52
7. Total Disbursements (from Line 31)	19500.00	19500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	85163.52	85163.52
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	41500.00	54000.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	225.00	225.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	41725.00	54225.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	41725.00	54225.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	44225.00	56725.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44225.00	56725.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	19500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19500.00	19500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19500.00	19500.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	41725.00	54225.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41725.00	54225.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. David E. McGurn, Jr.

Mailing Address 214 Stockport Lane

City State Zip Code
Schaumburg IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arthur J. Gallagher & Co.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 01 2006

Transaction ID: 23468810

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. J. Martin Brayboy

Mailing Address 64 Whetstone Road

City State Zip Code
Harwinton NY 06791

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rose & Kiernan, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 01 2006

Transaction ID: 23468809

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. Howard Engel

Mailing Address 2004 Claridge Court

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mesirow Financial

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
02 01 2006

Transaction ID: 23297530

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Eric O. Leavitt
Mailing Address 1841 Michigan Avenue

City State Zip Code
Salt Lake City UT 84108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leavitt Group, The

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 6

Transaction ID: 23406467

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard S. Rohde
Mailing Address P.O. Box 3408

City State Zip Code
Rancho Santa Fe CA 92067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arrowhead Group

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 6

Transaction ID: 23485660

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael A. Paschke
Mailing Address 8623 S. Forest Ave.

City State Zip Code
Tempe AZ 85284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brown & Brown, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 6

Transaction ID: 23485596

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Joseph H. Feitelberg		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address 118 Huntington Avenue Apt. 1201		Transaction ID: 23575776
City State Zip Code Boston MA 02116-5743	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CFG Insurance Services	Occupation Insurance Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. Graham Chalfant		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address 21209 Baltic Drive		Transaction ID: 23575767
City State Zip Code Cornelius NC 28031	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Wachovia Insurance Services/Hamilton D	Occupation Insurance Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Mr. Thomas L. Mangan		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address 59 Andrew Road		Transaction ID: 23575768
City State Zip Code Manhasset NY 11030	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Hub International Limited	Occupation Insurance Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Bruce D. Guthart
Mailing Address 2794 Lindenmere Drive

City State Zip Code
Merrick NY 11566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hub International Limited

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576446

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Bill D. Henry
Mailing Address 3737 Potomac

City State Zip Code
Dallas TX 75205

FEC ID number of contributing
federal political committee.

C

Name of Employer
McQueary Henry Bowles Tro-
y, L.L.P.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576378

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Frederick de Grosz
Mailing Address 618 Manzanita Way

City State Zip Code
Woodside CA 94062-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABD Insurance & Financial
Services, Inc

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576476

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. W. Michael Mann
Mailing Address 2607 Jefferson Avenue

City State Zip Code
New Orleans LA 70115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eustis Benefits, L.L.C.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576467

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Nancy J. Ayers
Mailing Address 423 S. Bothwell Street

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mesirow Financial

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576377

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce L. Ferguson
Mailing Address 1006 Doric Circle

City State Zip Code
Louisville KY 40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Underwriters Safety & Cla-
ims, Inc.

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576405

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Philip J. Edmundson
Mailing Address 55 Cottage Street

City State Zip Code
Hingham MA 02043

FEC ID number of contributing
federal political committee.

C

Name of Employer
William Gallagher Assoc.
Ins. Brokers.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576243

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Markham R. McKnight
Mailing Address 7132 Moniteau Ct.

City State Zip Code
Baton Rouge LA 70809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wright & Percy Insurance

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576436

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Albert R. Counselman
Mailing Address 12313 Michaelsford Road

City State Zip Code
Cockeysville MD 21030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riggs, Counselman, Michael
& Downes.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576455

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Andrew G. Cassidy
Mailing Address 11109 Waycroft Way

City State Zip Code
Rockville MD 20852-3216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Early, Cassidy & Schillin-
g, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576445

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory B. Milward
Mailing Address 1640 Ashwood Road

City State Zip Code
Lexington KY 40502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Palmer & Cay of Kentucky

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23575778

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles R. Daniels, III
Mailing Address 23 Bridle Way

City State Zip Code
Pawling NY 12564

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rose & Kiernan, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576437

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Daniel D. Hite

Mailing Address 3104 Forrest Park Avenue

City State Zip Code
 Nashville TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Synaxis - Polk & Sullivan

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576430

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. James A. Paul, III

Mailing Address 5308 New Kent Road

City State Zip Code
 Richmond VA 23225

FEC ID number of contributing
federal political committee.

C

Name of Employer
BB&T - DeJarnette & Paul,
Inc.

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576406

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Joseph W. Hamilton, III

Mailing Address 3184 Wood Valley Road NW

City State Zip Code
 Atlanta GA 30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wachovia Insurance Servic-
es/Hamilton D

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576412

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. James R. Pender

Mailing Address 7845 Old Mill Road

City	State	Zip Code
Gates Mills	OH	44040

FEC ID number of contributing
federal political committee.**C**Name of Employer
Oswald CompaniesOccupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	0	/	2	0	0	6

Transaction ID: 23576389

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael W. Battle

Mailing Address 7600 SW 50th Avenue

City	State	Zip Code
Miami	FL	33143-6056

FEC ID number of contributing
federal political committee.**C**Name of Employer
Keen Battle Mead & CompanyOccupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	0	/	2	0	0	6

Transaction ID: 23576423

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Mr. Charles J. Falvey

Mailing Address 9 Whitman Terrace

City	State	Zip Code
Long Branch	NJ	07740-9310

FEC ID number of contributing
federal political committee.**C**Name of Employer
USI New YorkOccupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	0	/	2	0	0	6

Transaction ID: 23576465

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Stanley D. Loar Mailing Address P.O. Box 732 City Nicasio State CA Zip Code 94946 FEC ID number of contributing federal political committee. C Name of Employer Woodruff-Sawyer & Company Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Transaction ID: 23576449 Amount of Each Receipt this Period 1000.00
B. Full Name (Last, First, Middle Initial) Mr. John L. O'Brien, Jr. Mailing Address 13 Gristmill Road City Cedar Knolls State NJ Zip Code 07927-1201 FEC ID number of contributing federal political committee. C Name of Employer Herbert L. Jamison & Co., LLC Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Transaction ID: 23576411 Amount of Each Receipt this Period 500.00
C. Full Name (Last, First, Middle Initial) Mr. John J. Queirolo Mailing Address 14 Linden Road City Ridgefield State CT Zip Code 06877 FEC ID number of contributing federal political committee. C Name of Employer Webster Insurance Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Transaction ID: 23576464 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)

Ms. Cynthia O. Villemarette

Mailing Address 4209 Troy

City State Zip Code
Metairie LA 70001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eustis Benefits, L.L.C.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576458

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Mr. Christopher J. Nadeau

Mailing Address 7 LedgeStone Drive

City State Zip Code
Hopkinton MA 01748

FEC ID number of contributing
federal political committee.

C

Name of Employer
William Gallagher Assoc.
Ins. Brokers,

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576477

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Mr. Mario Vitale

Mailing Address 20 River Terrace
Apt. 11L

City State Zip Code
New York NY 10282

FEC ID number of contributing
federal political committee.

C

Name of Employer
Willis

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 23576475

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. H. Wade Reece

Mailing Address 1919 Reid Street

City State Zip Code
 Raleigh NC 27608

FEC ID number of contributing
federal political committee.

C

Name of Employer
BB&T Insurance Services

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 0 6

Transaction ID: 23575745

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)

Mr. Richard Marx

Mailing Address 501 East 79th Street
 Apartment 12E

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Professional Coverage Man-
agers, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 1 / 2 0 0 6

Transaction ID: 23593400

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Mr. Dean J. Stuessy

Mailing Address 2318 Pinefield Lane

City State Zip Code
 Houston TX 77063

FEC ID number of contributing
federal political committee.

C

Name of Employer
John L. Wortham & Son, L.-
L.P.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 3 / 2 0 0 6

Transaction ID: 23603699

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Fred Burns Mailing Address 2816 Avenue O City Galveston State TX Zip Code 77550 FEC ID number of contributing federal political committee. C Name of Employer John L. Wortham & Son, L.-L.P. Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 23 / 2006 Transaction ID: 23603688 Amount of Each Receipt this Period 1000.00
B. Full Name (Last, First, Middle Initial) Mr. James R. Davis Mailing Address 1 White Pillars Lane City Houston State TX Zip Code 77024 FEC ID number of contributing federal political committee. C Name of Employer John L. Wortham & Son, L.-L.P. Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 23 / 2006 Transaction ID: 23603714 Amount of Each Receipt this Period 1000.00
C. Full Name (Last, First, Middle Initial) Mr. Charles Flournoy Mailing Address P.O. Box 1388 City Houston State TX Zip Code 77251-1388 FEC ID number of contributing federal political committee. C Name of Employer John L. Wortham & Son, L.-L.P. Occupation Insurance Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 23 / 2006 Transaction ID: 23603711 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

41500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

A.

Full Name (Last, First, Middle Initial)

BB&T PAC

Mailing Address PO Box 31128

City

Raleigh

State

NC

Zip Code

27622-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 6

Transaction ID: 23594906

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Geoff Davis For Congress

Mailing Address PO Box 17192

City Fort Mitchell State KY Zip Code 41017

Purpose of Disbursement

Candidate Name
Rep. Geoffrey Davis

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 4

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 23545579

Date of Disbursement

02 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends For Mike McGavick

Mailing Address 101 Constitution Ave., NW
Suite 900 West

City Washington State DC Zip Code 20001

Purpose of Disbursement

Candidate Name
Mr. Michael McGavick

Office Sought: ☐ House
☒ Senate
☐ President

State: WA District: 2

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 23545580

Date of Disbursement

02 / 08 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends For Mike McGavick

Mailing Address 101 Constitution Ave., NW
Suite 900 West

City Washington State DC Zip Code 20001

Purpose of Disbursement

Candidate Name
Mr. Michael McGavick

Office Sought: ☐ House
☒ Senate
☐ President

State: WA District: 2

Disbursement For: 2003
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 23545581

Date of Disbursement

02 / 08 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 22

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Bud Cramer

Mailing Address 417 Eustis Avenue

City Huntsville State AL Zip Code 35801

Purpose of Disbursement
Void - Friends Of Bud Cramer

Candidate Name
Robert E. 'Bud' Cramer

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 5

Transaction ID: 23593351

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-1000.00

Void - Friends Of Bud Cramer

Full Name (Last, First, Middle Initial)

B. Pryce for Congress

Mailing Address C/O Mary Frances Pearson
1225 Connecticut Ave, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name
Deborah Pryce

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 23594482

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Back America's Conservatives PAC (BAC PAC)

Mailing Address 704 Fitzhugh Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 23594486

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democratic Senatorial Campaign Committee

Mailing Address 122 Maryland Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 23594495

Date of Disbursement

02 / 21 / 2006

Amount of Each Disbursement this Period

5000.00

011
Category/
Type

B. Jim Gerlach For Congress Committee

Mailing Address 911 Welsh Ayres Way

City Downingtown State PA Zip Code 19335

Purpose of Disbursement

Candidate Name
Rep. Jim Gerlach

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 6

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 23594492

Date of Disbursement

02 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

C. LINC PAC

Full Name (Last, First, Middle Initial)

Mailing Address 301 4th Street, NE
2nd Floor

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 23594497

Date of Disbursement

02 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

19500.00